ANNUAL REPORT 1997 Secretary of State DVISION OF CORPORATIONS DOCUMENT # P94000004595 (2) L. Corporation Name HI TECH MEDICAL LABORATORY, CORP. HI TECH MEDICAL LABORATORY, CORP. HI TECH MEDICAL LABORATORY, CORP. Principal Place of Business B666 NW 41 ST MAMI FL 33178 2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated of Qua 3. Date Incorporation Place 2. Principal Place of Business 3. Date Incorporation Place 3. This corporation Place 3. Date Information Place 3. Da	1997 8:00ar tary of State
1997       Division of control of controls         DOCUMENT # P94000004595 (2)         HI TECH MEDICAL LABORATORY, CORP.         Prancipal Place of Business         Maing Address         See MV 41 ST         Maing Address         See MV 41 ST         State, Apt 4, etc.         2. Principal Place of Business         Maing Address         State, Apt 4, etc.         2. Principal Place of Business         Maing Address         State, Apt 4, etc.         2. Principal Place of Business         Maing Address at a state of the	tary of State
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Principal Place of Business     2a. Mailing Address     4. FEI Number       GCSC     N.M. 41 ST     2b     95-96 (1804)       Suite, Apt 4, otc     2c     Suite, Apt 4, otc     5. Certificate of Status Dasin       City 5 State     2c     Cit 6 State     5. Certificate of Status Dasin       MIGM1 / FL     2a     Country     2 Cit 6 State     5. Certificate of Status Dasin       Zip 5     2b     Country     2 Cit 6 State     5. Certificate of Status Dasin       Zip 70     2b     2b     2b     2b     Country     8. Election Campaign Financ       Zip 70     2b     2b     2b     2b     2b     Country     8. This corporation has liability       3378     2b     2b     2b     2b     2b     2b     2b       DEL CASTILLO, DEREK     2b     2b     2b     2b     2b     2b     2b       Street Address of Current Registered Agent     51     Name and Address of N     52     55     55     56     56     55     56	·
GCCCC       N.W. 41 ST       26       GCCC       Suffe, Apt. 4, etc.       S. Certificate of Status Deskin         Club & State       27       Country       28       Suffe, Apt. 4, etc.       S. Certificate of Status Deskin         MICANI, FL       28       MONIN, FL       S. Election Campelgn Financ       Trust Fund Contribution         Zip       Sinter       Country       28       DDD       Finicat Statutes         33       T. D.       Country       29       30       DDD       Finicat Statutes         B. Name and Address of Current Registered Agent       10       Name       Name       Address of No         DEL CASTILLO, DEREK       State Provide Address of Current Registered Agent       81       Name       82         State of Inget provide ref. (Policity State Provide State Current Registered Agent of the corporation's board of differetors is Not Acc       83         GNALUER       Corporation State Current Registered Agent State	ed 3a. Date of Last Report 05/15/1996
Stute: Apr R, otc     Suite, Apr R, etc.     Suite, Apr R, etc.     8. Certificate of Status Desir.       City & Stute:     27     Country     28       M1GAN1 / FL     28     MOLAI), FL     Trust Fund Contribution       Zip     Country     28     MOLAI), FL     8. Election Campaign Finance       3/31 7(B)     28     DDDC     29     331 7(B)     Country     8. This corporation has liable       8. Name and Address of Current Registered Agent     10. Name and Address of N     10. Name and Address of N       9     Name and Address of Current Registered Agent     10. Name and Address of N       9586 NW 41 ST MIAMI FL 33178     10     Name       9586 NW 41 ST MIAMI FL 33178     11     Name       9     Country     23 Street Address (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of Notice 907 0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for office or registered Agent Society and Society and Society (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of negree address of Notice 907.0502 forces (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of negree address of Notice 907.0502 forces (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of negree address of Notice 907.0502 forces (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of negree address of Notice 907.0502 forces (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of Notice 907.0502 forces (P.O. Box Number is Not Acc Bagent 1an Ingen value for address of Notice 907.0502 forces (	Applied For Not Applicable
City & State       City & State       6. Election Campaign Financ         Yep       Country       21       Country       8. This corporation has liable         Yep       21       Yep       Country       8. This corporation has liable         Yep       28       Date       29       Yep       Country       8. This corporation has liable         Yep       28       Date       29       Yep       Country       8. This corporation has liable         Yep       28       Date       29       Yep       Country       8. This corporation has liable         Yep       28       Date       29       Yep       Country       9. Name and Address of N         Yep       Street Address (P.O. Box Number is Not Account in the provement of the street address (P.O. Box Number is Not Account in the provement of the street address (P.O. Box Number is Not Account in the provement of the street address (P.O. Box Number is Not Account in the provement of the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not Account in the street address (P.O. Box Number is Not A	\$8.75 Additional
Zip       Country       Zip       Country       Zip       Country       B. This corporation has liabil         323.70       20       DOCC       20       30       DOCC       8. This corporation has liabil         9. Name and Address of Current Registered Agent       30       DOCC       10. Name and Address of Number is Not Acc         9586 NW 41 ST       9586 NW 41 ST       81       Name       82       Street Address (P.O. Box Number is Not Acc         96. Country       97.00       97.00       97.00       97.00       97.00       97.00         97. Country       97.00       97.00       97.00       97.00       97.00       97.00       97.00         97.00 </td <td></td>	
33.17.6       [25]       [26]       [27]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [30]       [31]	Added to Fees
DEL CASTILLO, DEREK 9568 NW 41 ST MAANI FL 33178     81     Name       Parautati to the provement percent of percent of the state	Yes No
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Pursuant to the providence of sections 907.0502 and 607.1508, Florida Statutes, the above-hamed corporation's board of directors. I hereby agent 1 am faulturing of control to statute the approximation is board of directors. I hereby agent 1 am faulturing of control to the statute of section 607.0505, Florida Statutes, the corporation's board of directors. I hereby agent 1 am faulturing of control to the statute of section 607.0505, Florida Statutes, the corporation's board of directors. I hereby agent 1 am faulturing of control to the statute of section 607.0505, Florida Statutes, the corporation's board of directors. I hereby agent 1 am faulturing of control to the applicable (NOTE Registered Agent sponture required when reinstating)         GNATURE       OFFICE RS AND DIRECTORS       13.         ADDITIONS/CHANGES TO       DELETE       11 TITLE         Term       DEL CASTILLO, DEREK       12 NAME         8105 SW 93 AVE       13 STREET ADDRESS       14 CITY-ST-2IP         F       TD       DELETE       21 HILE         At aboress       13 STREET ADDRESS       14 CITY-ST-2IP         F       TD       DELETE       21 HILE         At aboress       2.4 OTTY-ST-2IP       2.4 OTTY-ST-2IP         F       TD       DELETE       2.1 STREET ADDRESS         MIAMI FL 33165       2.4 OTTY-ST-2IP       2.4 OTTY-ST-2IP         F       VD       DELETE       3.1 TITLE         BABOUN, RALPH       3.3 STREET ADDRESS       3.3 STREET ADDRESS	
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81 ADDRESS       8105 SW 93 AVE       1.3 STREET ADDRESS         MIAMI FL 33165       1.4 CITY-ST-ZIP         TD       DEL CASTILLO, ARELYS       2.2 NAME         4F7 ADDRESS       8105 SW 93 AVE       2.3 STREET ADDRESS         4F7 ADDRESS       8105 SW 93 AVE       2.3 STREET ADDRESS         Y-ST-ZIP       MIAMI FL 33165       2.4 CITY-ST-ZIP         VE       VD       DELETE       3.1 TITLE         WE       BABOUN, RALPH       3.2 NAME       3.3 STREET ADDRESS         Y-ST-ZIP       MIAMI LAKES FL 33015       3.4 CITY-ST-ZIP         VE       SD       DELETE       4.1 TITLE         SD       DELETE       3.4 CITY-ST-ZIP         VI       SANCHEZ, WILLIE       4.2 NAME         SEE ADDRESS       4.4 CITY-ST-ZIP         VI       SANCHEZ, WILLIE       4.3 STREET ADDRESS         SEE ADDRESS       MIAMI FL 33178       4.4 CITY-ST-ZIP         VI       SANCHEZ, WILLIE       4.4 CITY-ST-ZIP	Change Addition
E       TD       IDELETE       2.1 TITLE         AL       DEL CASTILLO, ARELYS       2.2 NAME         H1 ADDRESS       B105 SW 93 AVE       2.3 STREET ADDRESS         H1 ADDRESS       MIAMI FL 33165       2.4 City-St-ZiP         H2       VD       IDELETE       3.1 TITLE         H2       NAME       3.3 STREET ADDRESS       3.3 STREET ADDRESS         H2       VD       IDELETE       3.1 TITLE         H2       NAME       3.3 STREET ADDRESS       3.3 STREET ADDRESS         H1 ADDRESS       6335 N.W. 181 TERR.       3.3 STREET ADDRESS       3.4 City-St-ZiP         H2       MIAMI LAKES FL 33015       3.4 City-St-ZiP       4.1 TITLE         H2       SANCHEZ, WILLIE       4.2 NAME       4.2 NAME         H2       SANCHEZ, WILLIE       4.3 STREET ADDRESS       4.4 City-St-ZiP         H2       MIAMI FL 33178       4.4 City-St-ZiP       4.4 City-St-ZiP         H2       MIAMI FL 33178       IDELETE       5.1 TITLE	
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MIAMI FL 33165       2,4 City-ST-ZiP         #       VD         #       BABOUN, RALPH         #       8335 N.W. 181 TERR.         #       33 STREET ADDRESS         #       S35 N.W. 181 TERR.         #       33 STREET ADDRESS         #       SD         #       SD         #       SANCHEZ, WILLIE         #       SANCHEZ, WILLIE         #       S285 NW 106 CT         #       42 NAME         #       S285 NW 106 CT         #       44 City-st-ziP         #       DELETE         #       10 DELETE         #       S285 NW 106 CT         #       44 City-st-ziP         #       DELETE         #       DELETE         #       DELETE	
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EFT ADDRESS         6335 N.W. 181 TERR. MIAMI LAKES FL 33015         3 3 STREET ADDRESS           -S1-2P         MIAMI LAKES FL 33015         34. CITY-ST-2IP           F         SD         DELETE         41 TITLE           F         SANCHEZ, WILLIE         4. 2 NAME         4. 2 NAME           SET ADDRESS         5285 NW 106 CT         4.3 STREET ADDRESS         4.4 CITY-ST-2IP           F         MIAMI FL 33178         4.4 CITY-ST-2IP         4.4 CITY-ST-2IP	Change Addition
MIAMI LAKES FL 33015         34. CITY - ST - ZIP           F         SD         DELETE         41. THTLE           MIAMI LAKES FL 33015         34. CITY - ST - ZIP         41. THTLE           F         SANCHEZ, WILLIE         4. 2. NAME           SELADDRESS         5285 NW 106 CT         4.3. STREET ADDRESS           C: S1-ZIF         MIAMI FL 33178         44. CITY - ST - ZIP           E         DELETE         5.1. TITLE	
SANCHEZ, WILLIE         4. 2 NAME           SELADORESS         5285 NW 106 CT         4.3 STREET ADDRESS           STREET ADDRESS         4.4 CITY-ST-ZIP           E	······································
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6.3 STREET ADDRESS (- S1 - 2/0) 6.4 CITY - ST - 2/P	
1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida 1 information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same that an enforce or director of the consolition or the pecifier or truetee on powered to execute this report as required by Chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 12 or Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 13 of chapter 607, Florida 2 appears in Block 14 app	atutes. I further certify that the